FEB 0 3 2004 55

POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)

$\neg$	Declaration
	Submitted
	with Initial
	Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	20163DACB						
First Named Inventor	Louis S. Crocker, et al.						
CO	Louis S. Crocker, et al.  **COMPLETE IF KNOWN**  er 10/660,936  9/12/2003  1625						
Application Number	10/660,936						
Filing Date	9/12/2003						
Group Art Unit	1625						
Examiner Name	Davis, Z.N.						

As a below named inventor, I hereby declare that:							
My residence, post office ad	dress, and citizenshi	p are as stat	ed below next to my name.				
				n original, first and joint invention on the invention entitle		al	
POLYMORPHIC, AMORPHO 5-CHLORO-3-(4-METHANE							
the anneities tion of which		(Tit	le of the Invention)				
the specification of which	kat Number and Titl	a of the Inv	antion noted above				
bears the Attorney Doc OR	ket Number and Titi	e of the my	ention noted above				
is attached hereto OR							
was filed on (MM/DD/	YYYY) 09/12/200	as United States Application Number or PCT International					
Application Number 10/660			ded on (MM/DD/YYYY)		olicable).		
I hereby state that I have rev amended by any amendment			nts of the above identified sp	pecification, including the clai	ms, as		
I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
certificate(s), or 365(a) of any	PCT international average also identified be	application volumes by the	which designated at least on cking the box, any foreign a	r foreign application(s) for pat e country other than the Unite pplication for patent or invent on which priority is claimed.	d States of		
Prior Foreign Application Number(s)	Country		Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Cla	aimed? NO	
	,						
Additional foreign applica	tion numbers are listed	on a supplen	nental priority data sheet PTO/S	B/02B attached hereto.			
I hereby claim the benefit under	35 U.S.C. 119(e) of an	y United Stat		ted below.			
Application Number(s)		Filing Date (MM/DD/YYYY)		Attorney Docket Number			
50/167,922		11/29/1999		20163PV			

## DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. U.S. Parent Application or PCT Parent Parent Filing Date Parent Patent Number (MM/DD/YYYY) **Application Number** (if applicable) 10/342,379 01/14/2003 20163CA 10/180,399 06/26/2002 20163DA 11/28/2000 09/724,522 20163 Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith: Customer Number OR Registered practitioner(s) name/registration number listed below Registration Registration Name Name Number Number Raynard Yuro 45,570 David L. Rose 26,332 000210 Direct all correspondence to: X Customer Number Name Raynard Yuro Merck & Co., Inc. - Patent Department Address P.O. Box 2000, RY60-30 Address NJ Rahway ZIP 07065-0907 City State **Telephone** (732)594-0182 **USA** (732)594-4270 Country Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. Name of Sole or First Inventor: A petition has been filed for this unsigned inventor Given Name (first and middle [ifany]) Family Name or Surname Louis S. Crocker Inventor's Date Signature Residence: Belle Mead State NJ Country | US Citizenship |US City Post Office Merck & Co., Inc., P.O. Box 2000 Address City Rahway NJ ZIP 07065-0907 State Additional inventors are being named on the \_\_\_\_ supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.

## DECLARATION AND POWER OF ATTORNEY

## ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])						F	amily Na	ame or Surna	me			
					Cai		_					
Inventor's Signature	Dongue.						Date	Feb 3.	2006			
Residence: City	Edi	son	State	NJ	Country US				Citizenship	CN		
Post Office Address	Merck & Co. Inc. P.D. Box 2000					,						
City	Rahway		St		State	State NJ Z		ZIP	07065-090	07065-0907		
Name of Addition	nal J	oint Inventor, if any:			A	petiti	on has be	en filed f	en filed for this unsigned inventor			
Give	n Na	ame (first and middle [in	f any])			Family Name or Surname						
Inventor's Signature	1					Date						
Residence: City			State		Cot	Country		Citizenship				
Post Office Address		Merck & Co., Inc., P.O.		00								
City	Rahway		:	State NJ			ZIP	07065-0907				
Name of Additional Joint Inventor, if any:					A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])					Family Name or Surname							
Inventor's Signature					Date							
Residence: City			State		Cou	Country			Citizenship			
Post Office Address	Post Office Merck & Co. Inc. P.O. Box 2000											
City · Rahway				State	tate NJ Z		ZIP	07065-0907				
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Given Name (first and middle [if any])				Family Name or Surname								
Inventor's Signature					Date							
Residence: City			State		Cou	Country			Citizenship			
Post Office Address	Merck & Co., Inc., P.O. Box 2000				·							
City		Rahway			State NJ ZI		ZIP	07065-090	07065-0907			